

FEC FORM 5

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REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED**To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation DEFENDERS OF WILDLIFE ACTION FUND		3. FEC Identification Number <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C90007907 </div>			
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1130 17TH STREET NW					
(c) City, State and ZIP Code WASHINGTON DC 20036					
2.	Corporate filers only Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<table style="width: 100%; border: none;"> <tr> <td style="width: 5%; border: none;">Individual filers only</td> <td style="width: 65%; border: none;">Name of Employer</td> <td style="width: 30%; border: none;">Occupation</td> </tr> </table>			Individual filers only	Name of Employer	Occupation
Individual filers only	Name of Employer	Occupation			

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☒ 24-Hour Report ☐ 48-Hour Report
- ☐ July 15 Quarterly Report
- ☐ October Quarterly Report
- ☐ January 31 Year-End Report

(b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M M

 /

D D

 /

Y Y Y Y

THROUGH

M M

 /

D D

 /

Y Y Y Y

6. TOTAL CONTRIBUTIONS

.00

7. TOTAL INDEPENDENT EXPENDITURES.....

12011.00

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Anne Saer

10/26/2006

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee

MSHC Partners

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	0	6

Mailing Address

1155 15th ST

Amount

2011.00

City

Washington

State

DC

Zip Code

20005

Purpose of Expenditure

mailing

Category/
Type

006

Office Sought:

☒

House

State: OH

House

☐

Senate

☐

President

District: 15

Check One:

☒

Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mry Jo Kilroy

Calendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

MSHC Partners

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	0	6

Mailing Address

1155 15th St

Amount

2011.00

City

Washington

State

DC

Zip Code

20005

Purpose of Expenditure

Mailing

Category/
Type

006

Office Sought:

☒

House

State: PA

House

☐

Senate

☐

President

District: 10

Check One:

☒

Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Chris Carney

Calendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

MSHC Partners

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	0	6

Mailing Address

1155 15th St

Amount

2011.00

City

Washington

State

DC

Zip Code

20005

Purpose of Expenditure

Mailing

Category/
Type

006

Office Sought:

☒

House

State: TX

House

☐

Senate

☐

President

District: 22

Check One:

☒

Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Nick Lampson

Calendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

6033.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

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ITEMIZED INDEPENDENT EXPENDITURESPAGE **3 / 5**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee

MSHC Partners

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	0	6

Mailing Address

1155 15th ST

Amount

2011.00

City

Washington

State

DC

Zip Code

20005

Purpose of Expenditure

Mailing

Category/
Type

006

Office Sought:

☒

House

State: VA

House

☐

Senate

District: 2

☐

President

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Phil Kellam

Calendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

MSHC Partners

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	0	6

Mailing Address

1155 15th St

Amount

2011.00

City

Washington

State

DC

Zip Code

20005

Purpose of Expenditure

Mailing

Category/
Type

006

Office Sought:

☒

House

State: WI

House

☐

Senate

District: 8

☐

President

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Steve Kagen

Calendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Care2

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	0	6

Mailing Address

275 Shoreline Dr

Amount

326.00

City

Redwood Cith

State

CA

Zip Code

94065

Purpose of Expenditure

List rental

Category/
Type

006

Office Sought:

☒

House

State: AZ

House

☐

Senate

District: 1

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Rick Renzi

Calendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

4348.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **4 / 5**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
Care2

Date

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 6Mailing Address
275 Shoreline Dr

Amount

326.00

City State Zip Code
Redwood City CA 94065Purpose of Expenditure
List rentalCategory/
Type 006Office Sought: ☒ House State: AZ
☐ Senate District: 5
☐ PresidentCheck One: ☐ Support ☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
JD HayworthCalendar Year-To-Date Per Election
for Office Sought .00Disbursement For: ☐ Primary ☐ General
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Care2

Date

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 6Mailing Address
275 Shoreline Dr

Amount

326.00

City State Zip Code
Redwood City CA 94065Purpose of Expenditure
List rentalCategory/
Type 006Office Sought: ☒ House State: CA
☐ Senate District: 4
☐ PresidentCheck One: ☐ Support ☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
John DoolittleCalendar Year-To-Date Per Election
for Office Sought .00Disbursement For: ☐ Primary ☐ General
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Care2

Date

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 6Mailing Address
275 Shoreline Dr

Amount

326.00

City State Zip Code
Redwood City CA 94065Purpose of Expenditure
List rentalCategory/
Type 006Office Sought: ☒ House State: CA
☐ Senate District: 11
☐ PresidentCheck One: ☐ Support ☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCalendar Year-To-Date Per Election
for Office Sought .00Disbursement For: ☐ Primary ☐ General
☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

978.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 5 / 5

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
Care2

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	0	6

Mailing Address
275 Shoreline Dr

Amount

326.00

City

Redwood City

State

CA

Zip Code

94065

Purpose of Expenditure

List rental

Category/
Type

006

Office Sought:

☒

House

State: CO

House

☐

Senate

District: 4

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Marilyn Musgrave

Calendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Care2

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	0	6

Mailing Address
275 Shoreline Dr

Amount

326.00

City

Redwood City

State

CA

Zip Code

94065

Purpose of Expenditure

List rental

Category/
Type

006

Office Sought:

☒

House

State: FL

House

☐

Senate

District: 8

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Ric Keller

Calendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

652.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

12011.00